

DMV Lane Technician Observation Report

DMV Technician: <u>Bundy, Daniel</u>		Position: <u>1</u> or 2	
Station: <u>New Castle</u>	Date: <u>4-15-13</u>	Time: <u>12:15</u>	
Vehicle Make: <u>Chev</u>	Model: <u>Impala</u>	Year: <u>2002</u>	
GVWR:	Fuel Type: <u>GAS</u>	Registration Number: <u>X067424</u>	
Auditor: <u>Cowdrey</u>		Covert / <u>Overt</u> (circle one)	
	YES	NO	N/A
1. Did technician check vehicle paper work and verify VIN number?	<input checked="" type="checkbox"/>		
2. Was Emissions testing required?	<input checked="" type="checkbox"/>		
a) Was Emissions testing performed using OBD?	<input checked="" type="checkbox"/>		
b) Was Emissions testing performed using Analyzer Probe?			
c) Was Emissions testing performed using Paddle(s)?			
d) Was Emissions testing performed using Clip?			
3. Was Catalytic Converter inspection required?			<input checked="" type="checkbox"/>
a) Was Catalytic Converter inspection performed?			
4. Was Fuel Tank pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Tank pressure testing performed?			
5. Was Fuel Cap pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Cap pressure testing performed?			
6. Is this test a Re-check from a prior failure?			<input checked="" type="checkbox"/>
a) Which re-check test is being performed? 1 2 3 (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
New Castle and Kent Counties Only			
7. Was Two-Speed Idle testing required?		<input checked="" type="checkbox"/>	
a) Was Two-Speed Idle testing performed?			
Sussex County Only			
8. Was Curb Idle testing required?			
a) Was Curb Idle testing performed?			
Comment:			
Lane Supervisor Signature: _____			

Revised 04/12/2013

DMV Lane Technician Observation Report

DMV Technician: <i>Lampky Ellen</i>		Position: <u>1 or 2</u>	
Station: <i>McBryne</i>		Date: <i>4/15/13</i>	Time: <i>12:20</i>
Vehicle Make: <i>Honda</i>		Model: <i>Accord</i>	Year: <i>2000</i>
GVWR:	Fuel Type: <i>GAS</i>	Registration Number: <i>369327</i>	
Auditor: <i>Bourdaire</i>		Covert / <u>Overt</u> (circle one)	

	YES	NO	N/A
1. Did technician check vehicle paper work and verify VIN number?	<input checked="" type="checkbox"/>		
2. Was Emissions testing required?	<input checked="" type="checkbox"/>		
a) Was Emissions testing performed using OBD?	<input checked="" type="checkbox"/>		
b) Was Emissions testing performed using Analyzer Probe?			
c) Was Emissions testing performed using Paddle(s)?			
d) Was Emissions testing performed using Clip?			
3. Was Catalytic Converter inspection required?		<input checked="" type="checkbox"/>	
a) Was Catalytic Converter inspection performed?			
4. Was Fuel Tank pressure testing required?		<input checked="" type="checkbox"/>	
a) Was Fuel Tank pressure testing performed?			
5. Was Fuel Cap pressure testing required?		<input checked="" type="checkbox"/>	
a) Was Fuel Cap pressure testing performed?			
6. Is this test a Re-check from a prior failure?		<input checked="" type="checkbox"/>	
a) Which re-check test is being performed? 1 2 3 (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
New Castle and Kent Counties Only			
7. Was Two-Speed Idle testing required?		<input checked="" type="checkbox"/>	
a) Was Two-Speed Idle testing performed?			
Sussex County Only			
8. Was Curb Idle testing required?			
a) Was Curb Idle testing performed?			
Comment:			
Lane Supervisor Signature: _____			

Revised 04/12/2013